



Concord Recreation  
90 Stow St.  
Concord, MA 01742  
Phone (978)369-6460  
Fax (978)369-9403  
www.concordsummercamps.com

**PRESCHOOL ADVENTURES AND  
KALEIDOSCOPE– 2015  
CONCORD RECREATION**  
Licensed by the Concord Board of Health

Name: \_\_\_\_\_ M/F: \_\_\_\_\_ D.O.B. \_\_\_\_\_

Address: \_\_\_\_\_ Town: \_\_\_\_\_ Zip: \_\_\_\_\_

Age (at time of registration): \_\_\_\_\_ Grade entering Fall 2015: \_\_\_\_\_ Parents' Name: \_\_\_\_\_

Home # \_\_\_\_\_ Work # \_\_\_\_\_

Cell # \_\_\_\_\_ Email \_\_\_\_\_

Special Accommodations/Medications/Allergies, etc: \_\_\_\_\_

**Camp Dates**

**Week 1 June 29th-July 3\***

**Week 2 July 6th-July 10th**

**Week 3 July 13th-July 17th**

**Week 4 July 20th-July 24th**

**Week 5 July 27th-July 31st**

**Week 6 August 3rd-August 7th**

**Week 7 August 10th-August 14th**

**\*No Camp July 3rd**

**Preschool Adventures**

(ages 3 and 4)

Week 1 \_\_\_\_\_ \$212

Week 2 \_\_\_\_\_ \$265

Week 3 \_\_\_\_\_ \$265

Week 4 \_\_\_\_\_ \$265

Week 5 \_\_\_\_\_ \$265

Week 6 \_\_\_\_\_ \$265

Week 7 \_\_\_\_\_ \$265

**Kaleidoscope**

(Entering K & 1)

Week 1 \_\_\_\_\_ \$212

Week 2 \_\_\_\_\_ \$265

Week 3 \_\_\_\_\_ \$265

Week 4 \_\_\_\_\_ \$265

Week 5 \_\_\_\_\_ \$265

Week 6 \_\_\_\_\_ \$265

Week 7 \_\_\_\_\_ \$265

**Camp Hours: 9:00-12:30**

**Location: Harvey Wheeler**

**CAMP NOTES:**

- 1) **15%** second child discount applied to equal or lesser priced camp *(Must be enrolled in the same week of camp)*
- 2) Payment plans are available
- 3) Full payment must be received by **June 19th**
- 4) \$25 non refundable fee applied to each week of camp. For the refund/withdrawal policy please contact us
- 5) Late fee of **\$15.00** added to all registrations that are received after 3pm the Thursday before a new camp week

**SEND A CHILD TO CAMP-** We are inviting families to contribute to our camp scholarship fund. If you would like to contribute, please check an amount and the total will be added to your payment. Thank you.

\$5 \_\_\_\_\_ \$10 \_\_\_\_\_ \$15 \_\_\_\_\_ \$25 \_\_\_\_\_ \$50 \_\_\_\_\_ other \_\_\_\_\_



Exp. Date ☐☐☐☐/ ☐☐ Credit Card ☐ Master Card ☐ Visa ☐ Check ☐

Name on card \_\_\_\_\_ Signature: \_\_\_\_\_

Amount enclosed (50% deposit due upon registration): \_\_\_\_\_ Date: \_\_\_\_\_